



ADVISORY GUIDANCE

2026 · For Members

FOR THERAPEUTIC SCHOOLS & PROGRAMS

The Responsible *Adoption* of Artificial Intelligence in Therapeutic Schools and Programs

A field-specific framework for evaluating, implementing, and governing AI tools in behavioral healthcare and education settings.

ISSUED BY

National Association of Therapeutic Schools & Programs

DEVELOPED WITH

Dr. Brett Talbot · Brent Esplin · Derek Daley

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Why this guidance, and how to use it

Artificial intelligence is rapidly entering the sectors that shape therapeutic care — behavioral healthcare, education, and organizational operations. The decisions programs make now about how to evaluate and adopt these tools will have lasting implications for clinical quality, student safety, and public trust.

Therapeutic schools and programs are increasingly encountering AI-enabled tools intended to assist with documentation, treatment planning, student engagement, admissions screening, staffing optimization, safety monitoring, and operational analytics. This document provides NATSAP's advisory guidance for the responsible adoption of AI in these settings. It is intended to support program owners, executives, clinical leaders, and operations staff in informed decision-making and structured governance around these tools.

A NOTE ON SCOPE

This guidance is advisory in nature. It is not a regulatory mandate, a formal policy statement, or a new compliance obligation, and it does not replace professional licensure requirements, accreditation standards, or applicable state and federal laws. Rather, it offers principles and practical considerations to help programs balance innovation with clinical integrity, student safety, and public trust — adopting emerging technologies in ways that strengthen the relational and professional foundations of therapeutic care.

Programs are also encouraged to consult national and state-level professional guidance, including the American Psychological Association's *Ethical Guidance for AI in the Professional Practice of Health Service Psychology* (2025) and the Utah Office of AI Policy and Division of Professional Licensing's *Best Practices for the Use of Artificial Intelligence by Mental Health Therapists* (2025).

— The guidance that follows is organized into six sections — covering an overview of AI in therapeutic settings, the main categories of AI use, potential benefits, the risk landscape, core principles for responsible adoption, and governance and organizational readiness.



FOUNDATION

Understanding Artificial Intelligence in Therapeutic Settings

Artificial intelligence refers to machine-based systems that generate predictions, recommendations, classifications, or content based on patterns learned from data.

In therapeutic school and program settings, AI systems generally fall into two functional categories:

Predictive AI

TYPE 01

These systems produce **structured outputs** such as classifications, predictions, or risk scores. Examples include safety-trend detection, retention analytics, and intake triage scoring.

Generative AI

TYPE 02

These systems produce **flexible outputs** such as written drafts, summaries, conversational responses, or treatment-planning suggestions.

RISK VARIES BY DEPLOYMENT

The risk profile of any AI tool depends on *how* it is deployed and whether it directly interacts with students or influences clinical decision-making. A documentation assistant reviewed by a licensed clinician carries a very different risk profile than a student-facing conversational agent.



Categories of AI Use in Therapeutic Schools and Programs

A • Staff-Facing Tools

EMPLOYEE SUPPORT

These tools support employees in delivering care or managing operations. Examples include:

- Session transcription & documentation
- Treatment planning support
- Risk assessment analytics
- Supervision & fidelity monitoring
- Admissions screening support
- Marketing & communication drafting
- HR and staffing optimization
- Financial forecasting

Professional ethical guidance emphasizes maintaining human oversight and professional accountability when using such tools.

B • Student-Facing Tools

DIRECT INTERACTION

These tools directly interact with students and may include:

- AI-assisted therapeutic homework
- Chatbots for coping-skill reinforcement
- AI journaling prompts
- Intake conversational systems
- Digital mental health support apps

When evaluating student-facing applications, programs should be attentive to established quality indicators in mental health apps and services — including strong privacy protections, a sound evidence base, and appropriate boundaries in how relationships are represented and supported.

C • Operational & Enterprise Systems

PROGRAM-WIDE

These systems influence program-wide decisions and may include:

- Predictive safety alerts
- Placement support tools
- Retention analytics
- Incident trend detection

Even when not directly student-facing, these systems may materially affect care delivery and therefore require structured oversight.



Potential Benefits

Professional and industry guidance recognize that AI may deliver meaningful value across clinical and operational functions when implemented responsibly:

Improved workflow efficiency

Automating routine steps so clinicians and staff can focus on higher-value work.

Reduced administrative burden

Supporting documentation, reporting, and communication tasks that pull time from care.

Data-informed decisions

Surfacing patterns across treatment, safety, and operational signals to aid leadership.

Expanded access to supports

Enhancing access to structured interventions and between-session reinforcement.

Vendor evaluation frameworks also emphasize measurable clinical and operational impact as important considerations when selecting tools. When implemented responsibly, AI can allow clinicians to spend more time focused on relational and therapeutic engagement.

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RISKS

The Risk Landscape

RISK A

Accuracy & Reliability

AI systems can produce outputs that are incomplete, inconsistent, or inaccurate. Professional guidance emphasizes clinician review before incorporating AI-generated content into clinical decision-making.

RISK B

Bias & Equity

AI models are shaped by the data on which they are trained and may not perform equally across all populations. Programs should assess tools for potential bias and ensure they are appropriate for the individuals they serve.

RISK C

Privacy & Data Stewardship

Use of AI with behavioral health data requires careful attention to privacy, data handling, and third-party access. Establish contractual safeguards and understand storage, retention, and security practices before implementation.

RISK D

Student Safety & Relational Integrity

Conversational AI tools should support — not replicate — therapeutic relationships or licensed care. Student-facing tools warrant additional oversight, clear escalation pathways, and well-defined supervision structures.



Core Principles for Responsible AI Adoption

Across professional guidance, several consistent principles emerge. Programs that build these commitments into their evaluation and implementation processes are best positioned to adopt AI responsibly.

01 Human Oversight

AI should augment, not replace, licensed professional judgment. A qualified human remains accountable for clinical decisions, documentation, and care planning.

02 Transparency & Disclosure

Programs should disclose material AI use that significantly affects care or documentation so that students, families, and staff understand how AI participates in their experience.

03 Data Privacy & Security

Verify compliance with applicable privacy standards, and establish Business Associate Agreements when required. Clear contractual terms protect programs, staff, and students.

04 Continuous Monitoring

AI systems require ongoing monitoring for accuracy, drift, and evolving standards. Treat adoption as an iterative process, not a one-time decision.

05 Structured Implementation

Before scaling, clearly define use cases, involve relevant stakeholders, pilot tools, and evaluate integration into existing workflows.



Governance and Organizational Readiness

Responsible AI adoption is as much an organizational commitment as a technical one. Programs that establish clear structures before scaling use are better positioned to manage risk, support staff, and respond to evolving standards.

FOUNDATIONAL ELEMENTS

- Clear leadership accountability** – a named owner for AI decisions and oversight.
- Written AI governance policies** – documented guardrails that travel beyond any one leader.
- Defined oversight roles** – clinical, operational, and technical stakeholders with specified responsibilities.
- Staff education and training** – ongoing learning so use is informed, not improvisational.
- Monitoring and reassessment processes** – regular review of tools, outcomes, and vendor practices.

WHY IT MATTERS

Proactive governance aligns with national ethical recommendations encouraging thoughtful and adaptive AI integration. It signals to families, staff, and regulators that AI is being used with intent – not drift.



CLOSING

A Thoughtful Path Forward

Artificial intelligence presents meaningful opportunities for therapeutic schools and programs to improve efficiency, enhance structured supports, and strengthen operational insight. At the same time, these tools introduce important clinical, ethical, and privacy considerations.

Programs that adopt AI thoughtfully, proportionally, and transparently — while preserving human judgment and student-centered care — will be best positioned to harness innovation responsibly.

AI should strengthen therapeutic work,
not replace it.



References & Resources

AMERICAN PSYCHOLOGICAL ASSOCIATION · 2025

Ethical Guidance for AI in the Professional Practice of Health Service Psychology

apa.org/topics/artificial-intelligence-machine-learning/ethical-guidance-ai-professional-practice

UTAH OFFICE OF AI POLICY & DIVISION OF PROFESSIONAL LICENSING · 2025

Best Practices for the Use of Artificial Intelligence by Mental Health Therapists

commerce.utah.gov/wp-content/uploads/2025/04/Best-Practices-Mental-Health-Therapists.pdf

AMERICAN PSYCHOLOGICAL ASSOCIATION · 2026

How to Spot Red Flags in Mental Health Apps

VIDERA HEALTH

AI Buyer's Guide: The Litmus Test for Choosing Vendors and Evaluating AI Quality

7663316.fs1.hubspotusercontent-na2.net/hubfs/7663316/Videra%20Health%20AI%20Vendor%20Infographic.pdf

VIDERA HEALTH

AI Adoption Worksheet: Implementing AI Solutions in Behavioral Health

7663316.fs1.hubspotusercontent-na2.net/hubfs/7663316/Videra%20Health%20AI%20Implementation%20Worksheet.pdf

ABOUT THIS GUIDANCE

The National Association of Therapeutic Schools and Programs (NATSAP) serves as a resource for professional, ethical, and effective therapeutic programs. This guidance was developed through collaboration and consultation with Dr. Brett Talbot, who serves on the Advisory Committee for the State of Utah Board for Responsible and Ethical AI Integration and Policy, along with NATSAP Board Member Brent Esplin and NATSAP President Derek Daley.